

Re: JSLS. 2015;19:e2013.00272. Late Results after Splenectomy in Adult Idiopathic Thrombocytopenic Purpura

Dear Editor,

Thank you for Vecchio and his coworkers' remarks on our publication.

It is a well-known fact that efficacy of splenectomy in idiopathic thrombocytopenic purpura (ITP) can be influenced by several factors. In our study, young age and a preoperative response to steroids (steroid-dependent cases) were positive predictors for the success of splenectomy.¹

Our results confirmed several earlier studies.

The presence of accessory spleen is really an important and scientifically analysed factor in relation to splenectomy performed because of ITP. A meta-analysis summing more than 22 thousand people's data in 2017 the prevalence of accessory spleen is 14.5%.² The accessory spleens are localized mainly to the splenic hilum (62.1%).

We have found in three patients accessorial splenic islands intraoperatively, in two cases in the hilum, and in one case at the lower pole of the spleen that were removed during splenectomy. The postoperative follow-up was performed in hematological institutions, and the presence of resumed accessorial spleen was not proved based on their information; however, during the follow-up, we do not have accurate data about the image method. That

is the reason that we cannot examine the role of the accessory spleen.

We also believe the studies about the role of the accessory spleen is very important,³ and that is the reason that we finished our publication with demand of further studies in the future in this topic:

"In summary, literature data have been exceedingly heterogeneous with regard to predictive factors, even since the consensus guidelines were published. In addition, potentially prospective studies are necessary to determine predictive factors. Furthermore, long-term follow-up of patients with various imaging techniques is important to screen the accessory spleen and its possible role in non-responsive and refractory ITP."

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References:

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3. Vecchio R, Intagliata E, LA Corte F, Marchese S, Cacciola RR, Cacciola E. Late results after splenectomy in adult idiopathic thrombocytopenic purpura. *JSLS* 2015;19:e2013.00272.